## State of California- The Resources Agency DEPARTMENT OF PARKS AND RECREATION Division of Off-Highway Motor Vehicle Recreation

## APPLICATION FOR STATE OFF-HIGHWAY VEHICLE GRANT OR COOPERATIVE AGREEMENT (State's Use Only) PROJECT NUMBER: OR-

PROJECT TITLE: PROJECT DESCRIPTION/SCOPE:	PROJECT TITLE:									
Applicant:			TYPE OF APPLICANT: (Select One)							
Address:		City County					ıtv			
City:			District				Federal Agency			
State:			Educational Institution			1	Non-Profit Organization			
Zip:			Federally Recognized Native Amo					an T	ribe	
NEAREST CITY:		COUNTY NAME (S):								
GRANT OR PROJECT AGREEMENT TYPE: (Select One)										
Operations & Maintenance	Managen	Management			Planning	Planning Project or Study				
Law Enforcement Acquisitio			n			Safety Ed	ducatio	n or	Education Program	
Restoration	Equipmen					Developn	nent ar	nd M	ajor Maintenance	
COST BY SUB-ACTIVITIES(C, E, &R) GRANT AMOUN									NTATION	
Conservation \$						ck if complete or not complete at the time of nission)				
Enforcement \$ \$ Restoration \$		\$			Complete					
T-4-10 F 0 D 6	Rounded to th	ne nearest \$1,000)			Not Complete					
VEHICLE TYPE:					ı					
VEHICLE TYPE:  M/C  ATV	4WD		DB			OSV			OTHER	
M/C ATV	<b>'</b>	CONTA	1	N (S):		OSV			OTHER	
APPLICANT'S AUTHORIZED REPRESEN	<b>'</b>	CONTA	CT PERSO						OTHER	
M/C ATV	<b>'</b>	CONTA	1		rator				OTHER	
APPLICANT'S AUTHORIZED REPRESEN	<b>'</b>	CONTA	CT PERSO		rator				OTHER	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:	<b>'</b>	CONTA	CT PERSON	dministi					OTHER	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:	<b>'</b>	CONTA	Project A	dministi					OTHER	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:	<b>'</b>	CONTA	Project A Title: Telephon	dministi					OTHER	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:	<b>'</b>	CONTA	Project A Title: Telephon	dministi					OTHER	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:  Fax:	<b>'</b>	CONTA	Project A Title: Telephon Fax:	dministi					OTHER	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:  Fax:  Email:  AUTHORIZING SIGNATURE	NTATIVE AND		Project A Title: Telephon Fax: Email:	dministi e Numb	oer:					
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:  Fax:  Email:  AUTHORIZING SIGNATURE The undersigned understands and does he	Preby promise t	hat soil s	Project A Title: Telephon Fax: Email:	dministrie Numb	oer:	e habitat s			nagement and OHV	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:  Fax:  Email:  AUTHORIZING SIGNATURE	Preby promise t	hat soil s	Project A Title: Telephon Fax: Email:	dministrie Numb	oer:	e habitat s			nagement and OHV	
M/C ATV  APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:  Fax:  Email:  AUTHORIZING SIGNATURE The undersigned understands and does he law enforcement programs/activities will by	ereby promise to complete an	hat soil s	Project A Title: Telephon Fax: Email:	dministri e Numb	oer: vildlif	re habitat sle, pursua	ant to	Sec	nagement and OHV tion 5090.53 of the	
APPLICANT'S AUTHORIZED REPRESEN  Authorized Representative:  Title:  Telephone Number:  Fax:  Email:  AUTHORIZING SIGNATURE The undersigned understands and does he law enforcement programs/activities will be Public Resources Code.  I certify that this/these project(s) conform	ereby promise to be complete an	hat soil s	Project A Title: Telephon Fax: Email:	dministri e Numb	oer: vildlif	re habitat sle, pursua	ant to	Sec	nagement and OHV tion 5090.53 of the	